

**AMENDMENT TO H.R.
OFFERED BY MR. CARDIN**

**(Amendment to Medicare Modernization and Prescription
Drug Act of 2002)**

(Page & line nos. refer to Print of June 14, 2002 9:14 PM)

After section 206 [page 72, after line 24], insert the
following new section:

1 **SEC. 207. EXTENSION OF MUNICIPAL HEALTH SERVICE**
2 **DEMONSTRATION PROJECTS.**

3 The last sentence of section 9215(a) of the Consolidated
4 Omnibus Budget Reconciliation Act of 1985 (42 U.S.C.
5 1395b-1 note), as previously amended, is amended by striking
6 "December 31, 2004, but only with respect to" and all that fol-
7 lows and inserting "December 31, 2009, but only with respect
8 to individuals who reside in the city in which the project is op-
9 erated and so long as the total number of individuals partici-
10 pating in the project does not exceed the number of such indi-
11 viduals participating as of January 1, 1996."



Rural Amendment *Offered by Mr. Nussle*

- Rural hospitals in states where the average rural inpatient margin is negative get a 5% temporary bonus payment for 3 years.
- Bonus paid only to non teaching hospitals
- Urban hospitals in states where urbans have less than 3% inpatient margin) receive a temporary 5% bonus for 3 years.
- Bonus paid only to non teaching hospitals.
- Eligibility determined by the Medicare inpatient margin for all PPS acute care hospitals in each area calculated by the Medicare Payment Advisory Commission for 1999.

AMENDMENT TO H.R.
OFFERED BY MR. NUSSLE

**(Amendment to Medicare Modernization and Prescription
Drug Act of 2002)**

(Page & line nos. refer to Chairman's Mark of June 17, 2002)

At the end of title III [page 96, after line 31], add
the following new section:

1 **SEC. 311. RELIEF FOR CERTAIN NON-TEACHING HOS-**
2 **PITALS.**

3 (a) IN GENERAL.—In the case of a non-teaching hospital
4 that meets the condition of subsection (b), for its cost reporting
5 period beginning in each of fiscal years 2003, 2004, and 2005
6 the amount of payment made to the hospital under section
7 1886(d) of the Social Security Act for discharges occurring
8 during such fiscal year only shall be increased as though the
9 applicable percentage increase (otherwise applicable to dis-
10 charges occurring during such fiscal year under section
11 1886(b)(3)(B)(i) of the Social Security Act (42 U.S.C.
12 1395ww(b)(3)(B)(i)) had been increased by 5 percentage
13 points. The previous sentence shall be applied for each such fis-
14 cal year separately without regard to its application in a pre-
15 vious fiscal year and shall not affect payment for discharges for
16 any hospital occurring during a fiscal year after fiscal year
17 2005.

18 (b) CONDITION.—A non-teaching hospital meets the condi-
19 tion of this paragraph if—

20 (1) it is located in a rural area and the amount of the
21 aggregate payments under subsection (d) of such section
22 for non-teaching hospitals located in rural areas in the
23 State for their cost reporting periods beginning during fis-
24 cal year 1999 is less than the aggregate allowable operating
25 costs of inpatient hospital services (as defined in section
26 1886(a)(4) of such Act) for all such hospitals in such areas



1 in such State with respect to such cost reporting periods;
2 or

3 (2) it is located in an urban area and the amount of
4 the aggregate payments under subsection (d) of such sec-
5 tion for non-teaching hospitals located in urban areas in
6 the State for their cost reporting periods beginning during
7 fiscal year 1999 is less than 103 percent of the aggregate
8 allowable operating costs of inpatient hospital services (as
9 defined in section 1886(a)(4) of such Act) for all such hos-
10 pitals in such areas in such State with respect to such cost
11 reporting periods.

12 The amounts under paragraphs (1) and (2) shall be determined
13 by the Secretary of Health and Human Services based on data
14 of the Medicare Payment Advisory Commission.

15 (c) DEFINITIONS.—For purposes of this section:

16 (1) NON-TEACHING HOSPITAL.—The term “non-teach-
17 ing hospital” means, for a cost reporting period, a sub-
18 section (d) hospital (as defined in section 1886(d)(1)(B) of
19 the Social Security Act, 42 U.S.C. 1395ww(d)(1)(B)) that
20 is not receiving any additional payment under section
21 1886(d)(5)(B) of such Act (42 U.S.C. 1395ww(d)(5)(B))
22 or a payment under section 1886(h) of such Act (42 U.S.C.
23 1395ww(h)) for discharges occurring during the period.

24 (2) RURAL; URBAN.—The terms “rural” and “urban”
25 have the meanings given such terms for purposes of section
26 1886(d) of the Social Security Act (42 U.S.C. 1395ww(d)).



TALKING POINTS ON CARDIN/THURMAN TRICARE AMENDMENT

Description of Amendment: This amendment eliminates the Medicare Part B late enrollment penalty for all enrollees who sign up between January 1, ~~2001~~²⁰⁰³ and December 31, 2003, and it creates a continuous enrollment period through the end of 2003 so that retirees can sign up immediately.

Background: The Floyd A. Spence National Defense Authorization Act for FY2001 opened TRICARE to Medicare-eligible military retirees for the first time, allowing them to keep their military health benefits past the age of 65. This benefit became available for the first time on January 1, ~~2001~~. ²⁰⁰³

But two barriers are preventing tens of thousands of retirees from accessing these benefits:

First, Medicare imposes a 10% penalty on the Part B premium for every year that enrollment is delayed. Many retirees who received care in military health facilities on a space-available basis did not purchase part B when initially eligible. They now find themselves subject to prohibitively expensive surcharges, e.g., a 50% premium surcharge for a 70 year-old who delayed enrollment.

Second, because Medicare enrollment is only available during an “annual open enrollment season”—from January 1 through March 31 each year—many retirees will have to wait until next year to secure coverage.

Scope: 90,000 Medicare-eligible retirees and spouses do not have Medicare Part B.

Endorsements: The Retired Enlisted Association (TREA), the Retired Officers Association (TROA), the Veterans of Foreign Wars, the Fleet Reserve Association, the Paralyzed Veterans of America, and the Non Commissioned Officers Association of the United States have all endorsed this provision.

Cost: This provision has been scored by CBO at \$100 million over ten years.

AMENDMENT TO H.R.

OFFERED BY MR. CARDIN AND MRS. THURMAN

(Amendment to Medicare Modernization and Prescription
Drug Act of 2002)

(Page & line nos. refer to Print of June 14, 2002 9:14 PM)

At the end of subtitle B of title V [page 121, after
line 10], insert the following new section:

1 **SEC. 517. WAIVER OF MEDICARE PART B LATE ENROLL-**
2 **MENT PENALTY FOR CERTAIN MILITARY RE-**
3 **TIREES; SPECIAL ENROLLMENT PERIOD.**

4 (a) WAIVER OF PENALTY.—

5 (1) IN GENERAL.—Section 1839(b) (42 U.S.C.
6 1395r(b)) is amended by adding at the end the following
7 new sentence: "No increase in the premium shall be ef-
8 fected for a month in the case of an individual who is 65
9 years of age or older, who enrolls under this part during
10 2001, 2002, or 2003, and who demonstrates to the Sec-
11 retary before December 31, 2003, that the individual is a
12 covered beneficiary (as defined in section 1072(5) of title
13 10, United States Code). The Secretary of Health and
14 Human Services shall consult with the Secretary of De-
15 fense in identifying individuals described in the previous
16 sentence."

17 (2) EFFECTIVE DATE.—The amendment made by
18 paragraph (1) shall apply to premiums for months begin-
19 ning with January ~~2001~~²⁰⁰³. The Secretary of Health and
20 Human Services shall establish a method for providing re-
21 bates of premium penalties paid for months on or after
22 January ~~2001~~²⁰⁰³ for which a penalty does not apply under
23 such amendment but for which a penalty was previously
24 collected.

25 (b) MEDICARE PART B SPECIAL ENROLLMENT PERIOD.—

26 (1) IN GENERAL.—In the case of any individual who,
27 as of the date of the enactment of this Act, is 65 years of



Title V Adopted by unanimous consent
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AMENDMENT TO H.R. 4954

OFFERED BY MR. CAMP AND MR. JEFFERSON

(Amendment to Medicare Modernization and Prescription
 Drug Act of 2002)

(Page & line nos. refer to Chairman's Mark of June 17, 2002)

Page 123, after line 5, insert the following new sec-

tion:

1 **SEC. 518. MEDICARE COVERAGE OF CHOLESTEROL AND**
 2 **BLOOD LIPID SCREENING.**

3 (a) IN GENERAL.—Section 1861 (42 U.S.C. 1395x) is
 4 amended—

5 (1) in subsection (s)(2)—

6 (A) by striking “and” at the end of subparagraph
 7 (U);

8 (B) by adding “and” at the end of subparagraph
 9 (V); and

10 (C) by adding at the end the following new sub-
 11 paragraph:

12 “(W) cholesterol and other blood lipid screening tests
 13 (as defined in subsection (ww)(1));” and

14 (2) by adding at the end the following new subsection:

15 “Cholesterol and Other Blood Lipid Screening Test

16 “(ww)(1) The term ‘cholesterol and other blood lipid
 17 screening test’ means diagnostic testing of cholesterol and other
 18 lipid levels of the blood for the purpose of early detection of
 19 abnormal cholesterol and other lipid levels.

20 “(2) The Secretary shall establish standards, in consulta-
 21 tion with appropriate organizations, regarding the frequency
 22 and type of cholesterol and other blood lipid screening tests, ex-
 23 cept that such frequency may not be more often than once
 24 every 2 years.”.

25 (b) FREQUENCY.—Section 1862(a)(1) (42 U.S.C.
 26 1395y(a)(1)) is amended

27 (1) by striking “and” at the end of subparagraph (H);

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1 (2) by striking the semicolon at the end of subpara-
2 graph (I) and inserting “, and”; and

3 (3) by adding at the end the following new subpara-
4 graph:

5 “(J) in the case of a cholesterol and other blood lipid
6 screening test (as defined in section 1861(ww)(1)), which
7 is performed more frequently than is covered under section
8 1861(ww)(2).”

9 (c) EFFECTIVE DATE.—The amendments made by this
10 section shall apply to tests furnished on or after January 1,
11 2004.



AMENDMENT
OFFERED BY MR. MCCREERY

Strike title X (and amend the table of contents accordingly).

